

Dangerous Waste Annual Report Verification Form

1997

Washington State Department of Ecology Hazardous Waste Information P. O. Box 47658 Olympia, WA 98504-7658 (800) 874-2022 (within state)

(360) 407-6170

Form	Review	Data Entry	Verification
VF			
GM		Y-	
WR			
OI			

TEC	EIVEDO	
Company Name: Long Painting Co	2 1997 INTING CO. County: KING SIC: 1721	This Report is Due No Later Than March 2, 1998
Please fill in any corrected information on the right ha	1h	
Name: Long Painting Co Address: PO BOX 81435 SEATTLE, WA 98108-1335	Name: Address:	
2a The legal company/agency owner of this site is:	2b	
Name: Anne Long Address: PO BOX 81435 SEATTLE, WA 98108 Phone: (206) 763-8050 Ext:	Name: Address: Phone:	Ext:
Did the ownership of this site change in 1997? I represent the property of th	port covers waste activity for:	s Owner
3a The land owner of this site is: 3b		
Name: Anne Long Address: PO BOX 81435 SEATTLE, WA 98108 Phone: (206) 763-8050 Ext:	Name: Address: Phone:	Ext:
4a The contact for site visits and inspections is:	4b	All Annual Annua
Name/Title: John Carlson Mail Address: PO BOX 81435 SEATTLE, WA 98108	Name/Title: Address:	
Phone: (206) 763-8050 Ext: 5a The contact for annual report forms is:	Phone:	Ext:
on the contact for annual report forms is.	7	,
Name/Title: John Carlson Mail Address: PO BOX 81435 SEATTLE, WA 98108	Name/Title: Address:	

USEPA SF 1410162

Page 1 of __

6. Last Reported Hazardous Waste Generator Status:	LARGE QUANTITY GENERATOR (LQG)
Indicate the facility's generator status for 1997 by checking last reported (above), please use the Comments section (#	the appropriate boxes below. If the status has changed since #8, below) to explain.
6a, Generator Status	6b. Transportation Activity (requires prior notification)
Large Quantity Generator (LQG)	Transporter for your own waste
Medium Quantity Generator (MQG)	☐ Transporter for commercial purposes
	6c. Treatment, Storage, Disposal, Recycling (TSDR) Facility
Small Quantity Generator (SQG)	(Requires Permit)
No regulated dangerous waste generated	For waste generated at this facility .
	For waste generated by other facilities
7. Report Summary	
Please check off which forms are included in this report, submittal, please indicate method of your submission.	If any, and provide the total number of pages. For electronic data
Paper Form Submittal	Electronic Data Submittal
Generation and Management (GM) Form	☐ Disk(s) included
Off-site Identification Information (OI) Form	Data submitted on Internet
Waste Received (WR) Form 42 Total Number of pages submitted	
10tal Number of pages submitted	
required under EPA's Biennial Report. Ecology is request those in that report. I certify under penalty of law that this document and all at accordance with a system designed to assure that qualifies submitted. Based on my inquiry of the person of persons gathering the information, the information submitted is, to am aware that there are significant penalties for submitting for knowing violations. Signature (in ink) Name (print/type) Date Title	who manage the system, or those persons directly responsible for the best of my knowledge and belief, true, accurate and complete. In a false information, including the possiblity of fine and imprisonment May Agrip?
If you have special accomodation needs or require this do Waste and Toxics Reduction Program at (360) 407-6700 (cument in an alternative format, please contact the Hazardous (voice) or (360) 407-6006 (TDD).

Page 2 of 2

OFF-SITE IDENTIFICATION INFORMATION FORM ANSWER SHEET

Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many copies of this two-sided answer sheet as you will need.

Your Site	ID#: WAD 044036747
	e: LOWG PAINTING
FOR EC	OLOGY USE ONLY:
Date rece	eived:

Please complete this form if your facility received dangerous waste from off-site or shipped dangerous waste off-site during 1997.

Flease type of print legioly in blue of black in
RCRA Site ID Number: CADOO9452657 Name: ROMIC EN UTRANIMENTAL TECHNOLOGIES
Address: 2081 BAY RA E, PALO ACTO, CA 94303
Handler type: (Check all that apply.) ☐ Generator ☐ Transporter ☐ TSDR
RCRA Site ID Number: <u>CAD 000 36 7755</u> Name: <u>DIABLO TRANSPORTATION</u>
Address: 5401 BYROW HOT SPRINGS BD BYROW, CA 94514
Handler type: (Check all that apply.) ☐ Generator ☐ Transporter ☐ TSDR
RCRA Site ID Number: AZD 0090153 89 Name: LOMIC ENUIRON MENTAL TECHNOLOGIES SW
Address: 6760 W. AUTSON RO. CHANDLEL, AZ 85226
Handler type: (Check all that apply.) ☐ Generator ☐ Transporter ☐ TSDR
Comments:

Page 3

BOOK 1: 1997 FORMS AND INSTRUCTIONS

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	PLEASE ENTER: YOUR Site ID #: Site name:
RCRA Site ID Number: Name:	5
Address:	
Handler type: (Check all that apply.) 🗆 Generator	☐Transporter ☐TSDR
RCRA Site ID Number:Name:	
Address:	
Handler type: (Check all that apply.) 🗆 Generator	☐Transporter ☐TSDR
RCRA Site ID Number: Name:	
Address:	
Handler type: (Check all that apply.) 🗆 Generator	☐Transporter ☐TSDR
RCRA Site ID Number:Name:	
Address:	
Handler type: (Check all that apply.) ☐ Generator	☐Transporter ☐TSDR
RCRA Site ID Number:Name:	
Address:	
Handler type: (Check all that apply.) Generator	
	Page

BOOK 1: 1997 FORMS AND INSTRUCTIONS

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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

	SE ENTER: : SITE ID #: <u>WAD 044036 747</u>
	ame: LONG PAINTING
FOR E	COLOGY USE ONLY:
Date	eceived:

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dangerous Was	te Stream
A-1. 340 799 (optional)	
A-2. JAM CLEAN UP OF	LINABOND WASTE
A-3. NONE	A-4. WTO2
A-5. DEHW DOW A-6.	No ☐Yes A-7. A 5 3
A-8. B 301 A-9. D 1 1 111	i □ iv □ v(lf v, answer A-9.a.)
	A-9.a. M
B. Waste Management Activities	
B-1. 3000 DST DMT X P	☐ K ☐ G ☐ L ☐ C (If G, L, or C, answer B-1.a.)
B-1.a.	☐ Lbs/gal ☐ Specific Gravity ☐ Lbs/yd³
B-2. On-site Off-site O Both	
B-3a. U	Yes ☐ No ☐ DK B-3b. ☐ Yes ☐ No ☐ DK
ID Numbers M	stem Code iii. Quantity iv. Recycling Percent
M	7.32 330 4

PLEASE ENTER:

YOUR SITE ID #: WAD 044036 747 B-5. If additional space is required, use continuation sheet on the following page. /v. Desigation Facility (TSDR) RCRA Site ID Number i. Date Shipped (mm/dd) ii. Manifest Document iii. Internal Tracking v. Quantity Shipped Number Code (optional) CAD009457657 C. Comments

1997 GM

Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER	R: #: <i>WAO 0440 36 74 7</i>
	WG PAINTING
oite flame,	100 11101010
FOR ECOLOGY	USE ONLY:
Date received:	

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dangero	us Waste Stream	
A-1. 300372 (optional)		
A-2. PUMPABLE PAS	INT WASTES	
A-3. DOO/ DOOG DOO 7 DOO	18 Fan 3 Faa5	A-4. WTO 2
A-5. DEHW SOW	A-6. ⊠No □Yes	A-7. A 2/
A-8. B 209 A-9. Xi		answer A-9.a.)
	A-9.a. M	
B. Waste Management Act	ivities	
B-1. <u>58980</u> □ ST □ M	T X P OK OG O	L C (If G, L, or C, answer B-1.a.)
	B-1.a. 1/19 DL	bs/gal □Specific Gravity□ Lbs/yd³
B-2. ☐ On-site ☐ Off-site ☐ E	Both CHECK WITH	BRIAN
B-3 M	B-3a. Yes No Dk	B-3b. 🗆 Yes 🗆 No 🗆 DK
B-4. i. Designated Facility (TSDR) ID Numbers CADOO9 457657	М	Quantity /v. Recycling Percent 8, 900 40%
, 	. M	

PL	P 6	CC	 117	- 9-	3	
PI.	P- 24	3.0	 IN I	-	ĸ	

YOUR SITE ID #: WAD 0440 36747
Site name: LANG PATNTTNG

i. Date Shipped (mm/dd)	ii. Manifest Document Number	III. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
1-29-97	46639	300372	CADOO9452657	2400
2-11-97	46656			2400
2-25-97	4666			4400
3-11-97	46688			5000
3-28-97	46707			1500
4-11-97	46713			3500
5-16-97	46798			880
6-10-97	18452			1200
6-27-97	72478			3200
7-22-97	18476			800
8-5-97	18594			1500
8-76-97	18606			1200
10-8-97	20042		ii	500
11-4-97	20101			2500
12-1-97	20253			3000
17-17-97	19316			5090
	-			
			*	
C. Comment	s			
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	1-3: EXTR	19 COVE	0035	

BOOK 1: 1997 FORMS AND INSTRUCTIONS

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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

er ezsiinikto	SE ENTER:	0044036747
	me: LANG /	
one m	ille. <u>AJAC /</u>	/ 1130 1123 02 -
FOR E	COLOGY USE ON	ILY:

A. Description of Dangerous Waste Stream
A-1. 300373 (optional)
A-2. NON PUMPABLE PAINT WASTE AND STILL BOTTOMS
A-3. 0001 0006 0007 0008 0035 F003 A-4. WTO2
A-5. DEHW MOW A-6. MNO DYes A-7. A 2/
A-8. B 209 A-9. 5%
A-9.a. M
B. Waste Management Activities
B-1. 49255
B-1.a. <u>N/A</u> □ Lbs/gal □ Specific Gravity □ Lbs/yd³
B-2. On-site Off-site O Both CHECK WITH BRIAN
B-3. M B-3a. Yes No DK B-3b. Yes No DK
B-4. i. Designated Facility (TSDR) ii. System Code iii. Quantity iv. Recycling Percent M CADO09457 657 M M052 49255 M
M Page 4

PLEASE ENTER:

YOUR SITE ID #: WADOYYD 36747
Site name: LONG AGINTING

/. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	/v. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
1129/97	46639	30073	CADO09457657	2800
7-11-97	46656		<i>i1</i>	3200
7-25-97	46666	10	11	400
3-11-97	46688	11		1000
3-28-47	46707	11		2500
4-11-97	46713	11		3000
5-16-97	46798	1 (4800
5-30-97	18434	11		3200
6-10-97	18452	10		1600
6-27-97	72478	11		2400
7-77-97	18476			3500
8-5-97	18594	1(2500
8-25-97	18606			3200
10-8-97	20042			5455
11-4-97	2010/			2200
12-1-97	20253	и		5000
12-17-97	19316			2580
9				
C. Comments	9			
A-	3: EXTRA (EDE: FOOS		
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER: YOUR SITE ID #: WADOYYO 36747 Site name: LONG PATINTING
FOR ECOLOGY USE ONLY: Date received:

A. Description of Dangero	us Waste Stream	
A-1(optional)		
A-2. RECYCLABLE SOLVE	ENTS DISTILLED	ON SITE
A-3. DOG DOG DOS DOS	5 Fa03 Fa05	A-4. WAD2 WTO 2
A-5. DEHW XDW	A-6. XINo □Yes	A-7. A_21
A-8. B 203 A-9. XI i]	nswer A-9.a.)
	A-9.a. M_	
B. Waste Management Act	ivities	
B-1. /320 DST DM	тор ок Же ог	☐ C (If G, L, or C, answer B-1.a.)
	B-1.a. 6,5 ★Lb	s/gal □Specific Gravity □ Lbs/yd³
B-2. On-site Off-site D	Both	
в-3. 8580 Р м_	B-3a. Q Yes Q No Q DK	B-3b. Yes No DK
B-4. i. Designated Facility (TSDR) ID Numbers WAO6 44036 747	M	Quantity /v. Recycling Percent

PLEASE ENTER:
YOUR SITE ID #: WAD 044036747
Site name: LOWE PAINTING

i, Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shippe

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A COLOR				
C. Comment				
A	-3 ADDITI	ONA CODE	5: 0001	
B-	4 RECYCL	NG SOWER	TS BY DISTILLY TO SHOWN ON P	7150N,
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Page 7

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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE B	NTER:
YOUR SI	EID#: WADO 44036747
	LONG PATINTENG
FOR ECO	OGY USE ONLY:
Date rece	ved:

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dangero	us Waste Stream	
A-1. 340027 (optional)		
A-2. GASOLINE:	PALL CLEAN - U	P
A-3. DOOL DOIS		A-4. WTO2
A-5. DEHW DW	A-6. ⊠No □Yes	A-7. A 53
A-8.B 301 A-9. 0 i 5	8/11 111 11 1 v(fv, a	answer A-9.a.)
	A-9.a. M	
B. Waste Management Act	ivities	
B-1. 5000 OST OM	T XIP OK OG O	L C (If G, L, or C, answer B-1.a.)
	B-1.a D L	bs/gal ☐Specific Gravity ☐ Lbs/yd³
B-2. On-site Off-site D	Both	
B-3 M	B-3a. Yes No DK	B-3b. 🗆 Yes 🗆 No 🗆 DK
B-4. i. Designated Facility (TSDR) ID Numbers CADOS 9 45 265 7	М	Quantity /v. Recycling Percent
		Page_10

PLEASE ENTER:
YOUR SITE ID #: WAD 044036747
Site name: LAWG PATWTING

B-5. If additional space is required, use continuation sheet on the following page.				
i. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
7-10-97	18462	340027	CADE09457657	5900

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C. Comment	s			
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

	SE ENTER: SITE ID #: WAD 0440.3674
Site n	ame: LONG PATUTONG
FOR E	COLOGY USE ONLY:

A. Description of Dangerou	is Waste Stream	
A-1.340//2 (optional)		
A-2. DIESEL FUEL S	PILL COLLECTIO	N WASTE
A-3. NONE		A-4. WTO2
A-5. DEHW DOW A	1-6. XNo □Yes	A-7. A_53_
A-8. B <u>219</u> A-9. □ i 🕱	<i>ii</i> □ <i>iii</i> □ <i>iv</i> □ <i>v</i> (lf <i>v</i> , an	swer A-9.a.)
400	A-9.a. M _	
B. Waste Management Activ	vities	
B-1. 1800	ØP □K □G □L	☐ C (If G, L, or C, answer B-1.a.)
	B-1.a D Lb:	s/gal ☐ Specific Gravity ☐ Lbs/yd³
B-2. On-site Off-site Be	oth	
B-3 M	B-3a. Yes No DK	B-3b. 🗆 Yes 🗆 No 🗆 DK
B-4. i. Designated Facility (TSDR) ID Numbers CADOO9 45 265 7	M	Quantity /v. Recycling Percent
	M	Page_/2

PLEASE ENTER:
YOUR SITE ID #: WAD 0440 36 747
Site name: LONG PAINTING

W. J.			n sheet on the following	
i. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
12-17-97	19316	340112	CADOO9 457 657	1880
Section (Control of Control of Co				
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			All properties and the second of the second	
***************************************				None and the supplementary of
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No. 257 By				
C. Comment	S			
18	Arrei -	OFIL MER	Pen 1 () ()	
T O	meser J	Relie CLEA	WUP	A STATE OF THE STA
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER: YOUR SITE ID #: WAPD 0440 36 74	1-7
Site name: LONG PRIVITING	
FOR ECOLOGY USE ONLY:	
Date received:	

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dangerou	s Waste Stream	
A-1. 34004/ (optional)		
A-2. UNUSED ORGIAN	IC LIOUTOS	CONTAINING LEAD
A-3. D808		A-4. WTO2
A-5. DEHW DW A	-6. ⊠No □Yes	A-7. A <u>58</u>
A-8. B <u>219</u> A-9. □ i 🕅	# □ # □ IV □ v(If v, a	nswer A-9.a.)
	A-9.a. M	
B. Waste Management Activ	/ities	
B-1. 800 DST DMT	NP OK OG OI	C (If G, L, or C, answer B-1.a.)
	B-1.a 🗆 Lk	os/gal Specific Gravity Lbs/yd³
B-2. On-site Off-site OB	oth	
B-3 M	B-3a. Yes No DK	B-3b. 🗆 Yes 🗆 No 🗆 DK
B-4. /. Designated Facility (TSDR) ID Numbers	M	Quantity iv. Recycling Percent
CADO09452657	M 042	800 0
	M	
		Page 14

PLEASE ENTER:
YOUR SITE ID #: WAD 0440 36747
Site name: LOWG PATWITING

B-5. If addition	al space is required	d, use continuatio	n sheet on the following	page.
i. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
8-5-97	18594	340041	CADO09 452657	600
11-4-97	20101			200
***************************************		And the second s		
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**************************************		Name of the Control o		i i i i i i i i i i i i i i i i i i i
According to the Control of the Cont				

			MATTHEW CONTRACTOR CON	
A Comment of the Comm				

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		A		
C. Comments	3			
A-8 (A-8 VACIOUS ORGANIC HOUSEHOLD ITEMS			
	TAINING			
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER: YOUR SITE ID #: WAD 0440, 36 747 Site name: Low 6 PAINTING
FOR ECOLOGY USE ONLY: Date received:

A. Description of Dangerous Wa	ste Stream
A-1.340085 (optional)	
A-2. ABSORBENTS WITT	H METHYL ETHYL KETONE
A-3. F005 0035	A-4. WTO2
A-5. DEHW DW A-6.	ÑNo □Yes A-7. A_53
A-8. B .319 A-9. Di 💥 ii D	iii □ iv □ v(lf v, answer A-9.a.)
	A-9.a. M
B. Waste Management Activities	
B-1. 900 OST OMT XIP	☐ K ☐ G ☐ L ☐ C (If G, L, or C, answer B-1.a.)
B-1.a	□ Lbs/gal □ Specific Gravity □ Lbs/yd³
B-2. ☐ On-site ☐ Off-site ☐ Both	
B-3 M B-3a.	☐ Yes ☐ No ☐ DK B-3b. ☐ Yes ☐ No ☐ DK
B-4. i. Designated Facility (TSDR) ii. S	ystem Code iii. Quantity iv. Recycling Percent
CADOO9 452657 M _	043 900 -
M _	

PLEASE ENTER:
YOUR SITE ID #: WAD 0440 36 747
Site name: LOW & PATINTING

B-5. If addition	al space is required	l, use continuatio	n sheet on the following	page.
i. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
11-4-97	20101	340085	CADE0945265	7 450
12-1-97	20253			450
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C. Comments	S			
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

community in	ASE ENTER: R SITE ID #: <u>-WAN 044036747</u>
	name: LOWG PATINTING
FOR	ECOLOGY USE ONLY:
	received:

A. Description of Danger	ous Waste Stream	
A-1. 335027 (optional)		
A-2. SPIU CLEANUS CADMIUM	O OF BOTLER CHE	EMICALS CONTAINING
A-3. D006		A-4. WTO2
A-5. DEHW DW	A-6. No □Yes	A-7. A 53
A-8. B 302 A-9. □ i	X	nswer A-9.a.)
	A-9.a. M_	
B. Waste Management Ad	tivities	
B-1. 380 DST DI	NT XIP OK OG OL	C (If G, L, or C, answer B-1.a.)
	B-1.a 🗆 Lb	os/gal ☐ Specific Gravity ☐ Lbs/yd³
B-2. On-site Off-site	Both	
B-3 M	B-3a. Yes No DK	B-3b. Yes No DK
B-4. /. Designated Facility (TSDF ID Numbers CAD 609452657	M	Quantity iv. Recycling Percent
	M	
		Page 20

PLEASE ENTER:

YOUR SITE ID #: WAD 044036 747 Site name: LONG PAINTING B-5. If additional space is required, use continuation sheet on the following page. ii. Manifest Document iii. Internal Tracking Number Code (optional) iv. Desigation Facility (TSDR) RCRA Site ID Number i. Date Shipped (mm/dd) v. Quantity Shipped 335027 C. Comments

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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER: YOUR SITE ID #: WADBY4036 ; Site name: LOWS PATUTING	147
FOR ECOLOGY USE ONLY: Date received:	Name of the same o

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

	AND THE PARTY OF T
A. Description of Danger	ous Waste Stream
A-1. 325370 (optional)	
A-2. LAB PACK	
A-3	A-4. UX.OZ
A-5. DEHW DW	A-6. No Dyes A-7. A 99
A-8.B_009 A-9. 🗆 i	Ø(ii □ iii □ iv □ v(lf v, answer A-9.a.)
1	A-9.a. M
B. Waste Management Ac	tivities
B-1. 3760 DST DM	MT AP OK OG OL OC (If G, L, or C, answer B-1.a.)
	B-1.a □ Lbs/gal □ Specific Gravity □ Lbs/yd³
B-2. On-site Off-site	Both
B-3 M	_ B-3a. ☐ Yes ☐ No ☐ DK B-3b. ☐ Yes ☐ No ☐ DK
B-4. i. Designated Facility (TSDF ID Numbers CAD 809457657	M
	Page 32

PLEASE ENTER:

YOUR SITE ID #: WAD 044036747
Site name: LANG PATNTING

B-5. If additional space is required, use continuation sheet on the following page.				
/. Date Shipped (mm/dd)	ii . Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
3-18-97	52257	325370	CAD00945765	7 3760
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C. Comments				
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER: YOUR SITE ID #: (L)AD 0440 36747 Site name: LOWG PATINTING
FOR ECOLOGY USE ONLY: Date received:

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dangeron	us Waste Stream	
A-1. 340090 (optional)		
A-2. LAB PACK		
A-3		A-4. WLOZ
A-5. DEHW DDW	A-6. No Yes	A-7. A 99
A-8. B <u>809</u> A-9. Di	(ii	inswer A-9.a.)
	A-9.a. M	
B. Waste Management Acti	vities	
B-1. 4/ DST DMT	MP DK DG D	L C (If G, L, or C, answer B-1.a.)
	B-1.a LI	os/gal Specific Gravity Lbs/yd³
B-2. On-site Off-site B	oth	1
B-3 M	B-3a. Yes No DK	B-3b. Yes No DK
B-4. i. Designated Facility (TSDR) ID Numbers CADEO9452657	//. System Code ///. M	Quantity iv. Recycling Percent

Page 24

PLEASE ENTER:

YOUR SITE ID #: WAD 044036 747

Site name: Low G PAINTING

B-5. If additional space is required, use continuation sheet on the following page.				
/. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
10-8-97	46677	340090	CADO09457657	41
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

YOUR SITE ID #: WAD 044036 74 Site name: LANG PATINTING	7_
Site name: 1006 PATINTING	
	~~~~
FOR ECOLOGY USE ONLY:	
Date received:	

A. Description of Dangerous Waste Stream				
A-1. 335362 (optional)				
A-2. ABSORBENT CONTAMINATED WITH GAJOLINF FROM SPILL CLEAN-UP				
A-3. <u>0018</u>		A-4. <u>UUTO2</u>		
A-5. DEHW DOW	A-6. XINo □Yes	A-7. A 53		
A-8. B 409 A-9. Di	[# 0 ## 0 1v 0 v( fv, a	answer A-9.a.)		
	A-9.a. M			
B. Waste Management Activities				
B-1. <u>500</u> OST OMT OP OK OG OL OC(If G, L, or C, answer B-1.a.)				
	B-1.a Q L	bs/gal □ Specific Gravity □ Lbs/yd³		
B-2. On-site Off-site B	oth			
B-3 M	B-3a. 🗆 Yes 🗆 No 🗆 DK	B-3b. 🗆 Yes 🗆 No 🗆 DK		
B-4. i. Designated Facility (TSDR) ID Numbers  CAD 909452657	M	Quantity iv. Recycling Percent		
		Page 26		

PLEASE ENTER:
YOUR SITE ID #: WYYD0440 36 747

Site name: LONG PAINTING

B-5. If addition	al space is required	d, use continuatio	n sheet on the following	page.
i. Date Shipped (mm/dd)	ii. Manifest Document Number	ili. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
3-28-97	46707	325362	CAD009452657	500
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C. Comments	3			9
A-8:	ABSORBENT:	5 WETH G	ASOLTHE REST.	DUES .
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Page 27

Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER: YOUR SITE ID #: <u>UNAD 044036 747</u> Site name: <u>LOWE ANTWING</u>
FOR ECOLOGY USE ONLY:  Date received:

A. Description of Dangerous Waste Stream					
A-1. 30696 2 (optional)					
A-2. SOCUENT PAGS EQUIPMENT	USED IN CUE	ANTING PARTS AND			
A-3. FOO.3 FOO.5 1635_		A-4. WTO2			
A-5. DEHW DDW	A-6. XNo □Yes	A-7. A 19			
A-8. B 409 A-9. XI	O    O    O  v O v( fv,a	nswer A-9.a.)			
	A-9.a. M				
B. Waste Management Activities					
B-1. 2350 DST DN	AT XP OK OG OI	L ☐ C (If G, L, or C, answer B-1.a.)			
	B-1.a D Lt	os/gal Specific Gravity Lbs/yd³			
B-2. On-site Off-site Both					
B-3, M	B-3a. 🗆 Yes 🗆 No 🗆 DK	B-3b. Yes No DK			
B-4. /. Designated Facility (TSDR ID Numbers  CAN 009 457 657		Quantity iv. Recycling Percent			

PLEASE ENTER:
YOUR SITE ID #: WAD 044036747
Site name: LOWG PAINTING

B-5. If additional space is required, use continuation sheet on the following page.  i. Date Shipped ii. Manifest Document iii. Internal Tracking iv. Designation Facility (TSDR) v. Quantity Shipped				
(mm/dd)	Number	Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	The desired of the poor
3-11-97	46688	306962	CADO09457651	500
5-16-97	46748	11		600
7-22-97	18476			400
8-5-97	18594			_500
10-8-97	20047	1i		350
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C. Comments				
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEAS	ENTER:	
YOUR	SITE ID #: UAD 044036	747
Site na	ne: LONG PAINTIN	16
FOR E	OLOGY USE ONLY:	
Date r	celved:	

A. Description of Dangerou	ıs Waste Stream			
A-1. 326573 (optional)				
A-2. SODIUM HY	DROXIDE SOLIL	WASTE		
A-3. NOWE		A-4. WTO:2		
A-5. DEHW DW A	1–6. XQ̂No □Yes	A-7. A 99		
A-8. B 3/9 A-9. □ i 💆	.   □     □  v □ v(!fv, a	answer A-9.a.)		
	A-9.a. M			
B. Waste Management Activities				
в-1. <u>400</u> 🗆 sт 🗆 мт	)∄P □K □G □	L C (If G, L, or C, answer B-1.a.)		
477	B-1.a DL	bs/gal □Specific Gravity □ Lbs/yd³		
B-2. ☐ On-site ☑ Off-site ☐ Both				
B-3 M	B-3a. Yes No DK	B-3b. 🗆 Yes 🗆 No 🗆 DK		
B-4. /. Designated Facility (TSDR) ID Numbers	//. System Code iii.	Quantity iv. Recycling Percent		
CAD 009 452 657	M_121	400 0		
	M			
		Page 30		

PLEASE ENTER:
YOUR SITE ID #: WAD 0440 36 747
Site name: LANG PAINTING

B-5. If additional space is required, use continuation sheet on the following page.					
i. Date Shipped (mm/dd)	ii . Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped	
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	- And Page	P	1		
C. Comments					
A-7: UNUSED PRODUCT					
A-8; SODIUM HYDROXIDE SOLID					
8)					

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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

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	ame: Len			
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FOR E	COLOGY US	E ONLY:		

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dangero	ous Waste Stream	
A-1. 326516 (optional)		
A-2. UNUSED	CORPOSIVE LIQU	ID (ISO PREP 184)
A-3. Q602		A-4. WTO2
A-5. DEHW DW	A-6. X No ☐ Yes	A-7. A
A-8. B <u>// D</u> A-9. □ i	Ø <i>ii</i> □ <i>iii</i> □ <i>iv</i> □ <i>v</i> (If <i>v</i> , a	answer A-9.a.)
B. Waste Management Ac	tivities	
B-1. 200 OST ON	NT XIP OK OG O	L C (If G, L, or C, answer B-1.a.)
	B-1.a DLI	bs/gal □ Specific Gravity □ Lbs/yd³
B-2. On-site Off-site	Both	
B-3. M	B-3a. Yes No DK	B-3b. Yes No DK
B-4. i. Designated Facility (TSDR ID Numbers  CAD CAD 9457 657	M	Quantity iv. Recycling Percent

BOOK 1: 1997 FORMS AND INSTRUCTIONS

Page_

PLEASE ENTER:

YOUR SITE ID #: 4390044036747
Site name: Low 6 PATIN TING

B-5. If addition  i. Date Shipped (mm/dd)	al space is required  ii. Manifest Document  Number		n sheet on the following  iv. Desigation Facility (TSDR)  RCRA Site ID Number	page. v. Quantity Shipped
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	William Control of the Control of th			
C. Comments	S			
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Page 33

Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

	SE ENTER: SITE ID #: <u>WAD 044 0 36 74</u>
	ame: LONG PATINTING
one ii	anie. 2000 777707300
FORE	COLOGY USE ONLY:

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dangerou	is Waste Stream
A-1. 326575 (optional)	
A-2. MIXED ACTO	WASTE
A-3. 0002	A-4. WTOZ
A-5. DEHW DOW	1-6. ∑No □Yes A-7. A <u>57</u>
A-8. B 104 A-9. Di	ii □ iii □ iv □ ν(lf ν, answer A-9,a.)
	A-9.a. M
B. Waste Management Activ	vities
B-1. 1020 OST OMT	P DK DG DL DC (If G, L, or C, answer B-1.a.)
	B-1.a. ☐ Lbs/gal ☐ Specific Gravity ☐ Lbs/yd³
B-2. On-site Off-site D Be	oth
B-3 M	B-3a.  Yes No DK B-3b. Yes No DK
B-4. i. Designated Facility (TSDR) ID Numbers	ii. System Code iii. Quantity iv. Recycling Percent
CAD 009 452 657	M 121 1020 -
	M

PLEASE ENTER:

YOUR SITE ID #: WAD 0440 36 747
Site name: LOW 6 PAINTING

B-5. If additional space is required, use continuation sheet on the following page.					
i. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped	
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C. Comments					
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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

PLEASE ENTER:	
YOUR SITE ID #: WADO44036	
Site name: LONG PATINTON	4
FOR ECOLOGY USE ONLY:	
Date received:	
Date received:	

Be sure to reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

A. Description of Dan	gerous Waste Stream
A-1. 326574 (optional	i)
A-2. 144 ORDFULO	RIC ACID USED IN MASONARY CLEANIUS
A-3. DOO2	A-4. LUTO 2
A-5. DEHW ZOW	A-6. XNo □Yes A-7. A D2
A-8. B 104 A-9. C	II
5 10 10 10 10 10 10 10 10 10 10 10 10 10	A-9.a. M
B. Waste Management	Activities
B-1. <u>490</u> □ ST	□ MT P □ K □ G □ L □ C (If G, L, or C, answer B-1.a.)
	B-1.a. ☐ Lbs/gal ☐ Specific Gravity ☐ Lbs/yd³
B-2. On-site Off-sit	e 🔾 Both
B-3 M _	B-3a. Q Yes Q No Q DK B-3b. Q Yes Q No Q DK
B-4. i. Designated Facility (TID Numbers)  CAD 90945365	M

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PLEASE ENTER:

YOUR SITE ID #: WAD 044036747

Site name: LOWG PAINTING B-5. If additional space is required, use continuation sheet on the following page. iv. Desigation Facility (TSDR) RCRA Site ID Number ii. Manifest Document iii. Internal Tracking Number Code (optional) i. Date Shipped (mm/dd) v. Quantity Shipped AN00945765 7-18-9 8470 C. Comments

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Please enter your RCRA Site ID number and your site name in the small box at the right, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Then complete one answer sheet for each waste stream.

	SE ENTER: SITE ID #: <u>WADO44036 74</u> 7
	ame: LONG AATWING
description of the second	
FOR E	COLOGY USE ONLY:
Data	eceived:

A. Description of Dangerous Waste Stream	
A-1. 340090 (optional)	
A-2. HYDROGEN PEROXIDE WAST	E
A-3. DOO! DOO2	A-4. WTO]
A-5. DEHW DW A-6. No DYes	A-7. A 04
A-8.B 207 A-9. Xi 0     0	f v, answer A-9.a.)
A-9.a.	. м
B. Waste Management Activities	
B-1. /D OST OMT SIP OK OG	☐ L ☐ C (If G, L, or C, answer B-1.a.)
B-1.a	☐ Lbs/gal ☐ Specific Gravity ☐ Lbs/yd³
B-2. ☐ On-site ☐ Off-site ☐ Both	
B-3 M B-3a. □ Yes □ No □	DK B-3b. Yes No DK
B-4. i. Designated Facility (TSDR) ii. System Code ID Numbers M M M M M	iii. Quantity iv. Recycling Percent

PLEASE ENTER:
YOUR SITE ID #: WAD 0 440 36 747
Site name: LONG PATNITING

B-5. If additional space is required, use continuation sheet on the following page.				
i. Date Shipped (mm/dd)	ii. Manifest Document Number	iii. Internal Tracking Code (optional)	iv. Desigation Facility (TSDR) RCRA Site ID Number	v. Quantity Shipped
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### Washington State Recycling Credit Romic Environmental Technologies Corporation

GENERATOR NAME: Long Parm to Jell Maxwell, R GENERATOR CONTACT NAME: Jo	1	
ADDRESS: 8025 10+4 Ave. S. Scattle		
TELEPHONE: (206) 762-8050 FAXII: (206) 767-4076		
1. ROMIC PROFILE#: 38 4 5/3	SHARETON TO BE CONDICTED BY KONIC PERSONNET MIA	
	1. Wester Form Code: Systems Code. MIZI	
WASTE DESCRIPTION Jodium Hydroxide	PERCENT RECYCLED:	
2. ROMIC PROFILE #: 211099	2. Waste Form Code System Code: MO61	
WASTE DESCRIPTION: Parts Cleaning Metures	PERCENT RECYCLED:	
3. ROMIC PROFILE#: 340056	3. Warte Form Code: System Code: MO6/	
WASTE DESCRIPTION: Waite Oil	PERCENT RECYCLED:	
	Title Project Coordinator	
Authorized Rounic Signature ————————————————————————————————————	TILE COPY FOR FIVE YEARS	
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### Washington State Recycling Credit Romic Environmental Technologies Corporation

4. ROMIC PROFILEN: 345735	THE LOW BOTH TO THE TOTAL	ACCESSONEL MILL
	4. Waste Form Code.	
WASTE DESCRIPTION: Un used Hydrigen Pedrille	PERCENT RECYCLED:	P MIYI
5. ROMIC PROFILE *: 326515	5. Waste Form Cods:	
WASTE DESCRIPTION: Mixed Acids	PERCENT RECYCLED:	M021
6. ROMIC PROFILE#: 300372	6 Waste Form Code	System Code: 40
WASTE DESCRIPTION:	PERCENT RECYCLED:	
7. ROMIC PROFILE#:	7. Waste Form Code:	System Code:
WASTE DESCRIPTION:	PERCENT RECYCLED:	
8. ROMIC PROFILE#:	8. Waste Form Code:	System Code:
WASTE DESCRIPTION:	PERCENT RECYCLED:	
9. ROMIC PROFILE#:	9. Waste Form Code	System Code.
WASTE DESCRIPTION:	PERCENT RECYCLED:	
10. ROMIC PROFILEM:	10. Waste Form Code.	System Code:
WASTE DESCRIPTION:	PERCENT RECYCLED:	
11. ROMIC PROFILE#:	11. Wasse Form Code:	
WASTE DESCRIPTION:	PERCENT RECYCLED	
12. ROMIC PROFILE#:	12. Wasse Form Code:	System Code:
WASTE DESCRIPTION:	PERCENT RECYCLED:	

HOMEC ENVERONMENATE TECHNOLOGIES CORP. - 4500 15° ST E, URLA - PUL, WA 90424 - G18) 128-4620

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END OF REPORT (Attach this page as the last page of your submission)

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